## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

2017/1-0994

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR SMALL ENTITY			
TOTAL CLAIMS			T a	d		7		RATE )	FEE		RATE	FEE	
			<del>                                     </del>					BASIC FEE			BASIC FEE		
FOR			NUMBER F	NUMBER FILED		NUMBER EXTRA		BASIC PEE	355.00	OR	5,4510 1 22	710.00	
TOTAL CHARGEABLE CLAIMS			9 min	9 minus 20=		•		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			d mir	/ minus 3 =				X40=		OR	X80=	80	
MU	LTIPLE DEPEN	DENT CLAIM	PRESENT	RESENT				+135=		OR	+270=		
* If	the difference	in column 1 i	s less than ze	ss than zero, enter "0" in column 2			ł	TOTAL		OR	TOTAL	790	
	· Ci		`			OTHER							
	•	(Column 1)		DED - PART II (Column 2) (Column 3)				SWALLE	NTITY	OR	SMALL		
NT A		CLAIMS REMAINING AFTER AMENDMEN		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	· 9	Minus	•• 2	20	= _		X\$ 9=		OR	X\$18=		
REEN	Independent	• 4	Minus	•••	પ	= /		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
										OR	TOTAL ADDIT. FEE		
ADDIT. FEE													
NT B		CLAIMS REMAINING AFTER AMENDMEN		HIG NUI PREV	HEST MBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total		Minus	**		=		X\$ 9=		OR	X\$18=		
REP	Independent	•	Minus	•••		]=	4	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ال	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	ar a lon a	CLAIMS REMAINING AFTER AMENDMEN		NU PRE\	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<b>EDE</b>	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		-		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												